125 3. HICKS

COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC WORKS BUILDING AND SAFETY / LAND DEVELOPMENT

EAST LA 4801 3RD ST LOS ANGELES CA 90022

PHONE: (323) 881-7030 EXT:

0600

MECHANICAL PERMIT ME 0600 1108180033

LEGAL ID:		T	DDDG DATE		DUTI DING ADDREGG
ON FILE			FEES PAID		BUILDING ADDRESS: 125 HICKS AV S
THE RESERVE OF THE PROPERTY OF		FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:	LOSA CA 900632414
ASSESSOR INFORMATION NUMBER:	191-101-101				NEAREST CROSS STREET:
5232-019-007		01 PERMIT ISSUANCE FEE 08 FURNACE/HEATER < 100	1.00 UNI	27.40 26.80	THOMAS PAGE: 635 GRID: D6 LOCALITY: LOS ANGELES
TENANT:			TOTAL FEES		ISSUED ON: PROCESSED BY: PLAN BY:
					08/18/11 MY
OWNER:	TEL. NO:				FINAL DATE FINAL BY: CODE:
HUMBERTO BARRERA 125 HICKS AV	(323) 263-5982-				U W'
LOSA 900632414					DESCRIPTION OF WORK C/O WALL FURNACE
APPLICANT: CHERYL	TEL. NO:				
		NIGELE			SPECIAL CONDITIONS:
 CONTRACTOR:	TEL. NO:	69 51			APPROVALS DATE INSPECTOR SIGNATURE
INTER-CITY ENERGY 12252 MCCANN DR	(562) 777-1161- LIC. NO	11/12 13			FAU/WALL FURNACE
SANTA FE SPRINGS CA	587709 C20	19 19 The Standing			COMBUSTION AIR OPENINGS
ARCHITECT OR ENGINEER:	TEL. NO:				DUCT WORK
	LIC. NO:				AC/COMPRESSOR
	Ele. No.				THERMOSTAT
		DIIDIIC			FIRE DAMPERS
					SMOKE DETECTION DEVICES
					COMMERCIAL HOOD
					COMMERCIAL ROOD
		(0)			
.5 Y 2 10 10 W		Service			
					<u>138 1</u>
100 Maria 1					
		2. 1. 02			
		Market Sec.			
Person and the second					
		REPORT ID: DPR264	ROUTE TO: BS0600		

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code): Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):

() I, as owner of the property, or my employees with wages as their sole compensation, will do (\(\sqrt{} \)) all of or (_) portions of the work, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.).

() I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law).

() I am exempt from licensure under the Contractors' State License Law for the following reason:

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: http://www.leginfo.ca.gov/calaw.html.

Date:			
Signature of Property Owner	or Authorized	Agent	

LICENSED CONTRACTOR'S DECLARATION	JC
I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.	LC
Date Class License No. 50 9 Date Contractor Signature Willy GULLIUM	W ma gr int
WORKERS' COMPENSATION DECLARATION	Ye
WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.	bu me Di Ye
I hereby affirm under penalty of perjury one of the following declarations: I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.	III SC ur Se m
Policy No. I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are: Policy Number Expiration Date	
Name of Agent Phone Number	- 1
I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of	W
California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor	Le Le
Code, I shall forthwith comply with those provisions	, Le
Signature of Applicant Date	By I pr
LOBBYIST ORDINANCE CERTIFICATION	pr
Complete this section for permits in Unincorporated Los Angeles County only	3 1
This is to certify that I, as permit applicant, am familiar with the	or
requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that	I
all persons acting on behalf of myself complied and will continue to comply therewith through the application process.	at
<u> </u>	3
A !! (/D ! (A !! (O !)	1

Applicant (Print Name) Applicant Signature Date Company Name

	ADDRESS	
LOC	CALITY	
mat	the applicant or fut erial or a mixture of	US MATERIAL DECLARATION Iture building occupant handle a hazardou containing a hazardous material equal to count specified on the hazardous material
Yes		No 🗆
build	ding occupant redification from the	of the building by the applicant or futur require a permit for construction of South Coast Air Quality Managemer See permitting checklist for guidelines.
Yes		No 🗆
SCA und Sec	AQMD permitting of er the Los Angelotions 220.100 th	rdous materials information guide and th checklist, I understand my requirement les County Code Title 2, Chapter 22 nrough 220.140 concerning hazardou for obtaining a permit from the SCAQMD.
	ASB	ESTOS NOTIFICATION
	Notification letter	sent to AQMD and/or EPA
	I declare that noting applicable to address	fication of asbestos removal is not ressed project.
	CLARATION REGA	ARDING CONSTRUCTION LENDING
Con	struction lending a	er penalty of perjury that there is agency for the performance of the work found (Section 3097, Civil Code).
Len	der's Name	
Len	der's Address	
l ai pro l ha pro l ai ordi con	m the property perty owner's bel ave read this apvided is correct. gree to comply inances and istruction.	ow, I certify to each of the following: owner or authorized to act on the half. oplication and the information I have with all applicable city and count state laws relating to building



Telacu Weatherization Inter-City Energy Systems, Inc.



Heating / Air Conditioning, Insulation, Sales and Service License # 587709, Licenses held B, C10 and C20

February 27, 2012

County of Los Angeles Building Department 4801 3rd St., Los Angeles, CA 90022

Attention: Building Department

We will no longer need the permit issued to Maria Barrera at 125 S. Hicks Ave., Los Angeles, CA 90063. No installation was ever done by our company, and no work will be done in the near future. We are requesting a refund for permit: ME 0600 1108180033. Please make the refund payable to: Inter-City Energy Systems, Inc. We thank you, and apologize for the inconvenience.

Sincerely,

Robert Villasenor Operations Manager (800) 906-3911

BUILDING & SAFETY DIVISION REQUEST FOR REFUND

Refund Amount:	43.30		Date of Request	3.13.12	
To: Address:	Cheryl (15237 C	Posswo	od Rd.	_	
Collected for:	Mechan	ical F	ermit	· · · · · · · · · · · · · · · · · · ·	1 .
Departmental or Other Refer		0600004	572		
Reason for Refund:	Cancelled	Perm	it/No Wo	rk done	
Division: Contact:	Building + Sylvia Ho	Safety	Section: <u>E.A</u> Phone: <u>323</u>) 881-1030	
Steep	Je		Steve		
Authorized Ap	proval Signature*			Print Name	
sign Requests for	or Refunds. The upda	ated List is locate	ed at p:\fdpub\general\t	tion List) are authorized forms\RP Forms. Conta tructions on how to add	ct
		FISCAL USE	ONLY		
Date Received:		Received by:			_

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS DEVELOPMENT AND PERMITS TRACKING SYSTEM

DATE: 03/13/12 TIME: 13:12:21 DPR4052

PAGE 1

and the second ROUTE TO: BS0600

REQUESTED BY: XXXXXXX

FEE RECEIPT

RECEIPT NUMBER: BS06000046572 ***** DUPLICATE RECEIPT ****

THIS IS A RECEIPT FOR THE AMOUNT OF FEES COLLECTED AS LISTED BELOW. THE RECEIPT NUMBER, DATE AND AMOUNT VALIDATED HEREON HAS ALSO BEEN VALIDATED ON YOUR APPLICATION OR OTHER DOCUMENT AND HAS BECOME A PART OF THE RECORD OF THE COUNTY OF LOS ANGELES, FROM WHICH THIS RECEIPT MAY BE IDENTIFIED. PLEASE RETAIN THIS RECEIPT AS PROOF OF PAYMENT. ANY REQUEST FOR REFUND MUST REFERENCE THIS RECEIPT NUMBER.

DATE PAYMENT RECEIVED: 08/18/11 15:58:23

PROJ/APPL/IMPRV NBR: ME 1108180033

permit cancelled PROPERTY ADDRESS: 125 HICKS AV S LOSA 900632414

RELATED PROJECT:

PAYOR NAME: CHERYL GAUTHIER

ADDRESS: 15237 CROSSWOOD RD

LA MIRADA CA 90638

PHONE: (714) 994-1473 EXTN:

PAYOR NOTES:

PEF RECETPO

WORK DESCRIPTION: C/O WALL FURNACE

STATISTICAL CALCULATION UNIT OF EXTENDED CODE FACTOR MEASURE ITEM FEE DESCRIPTION AMOUNT 01 PERMIT ISSUANCE FEE A018310 \$27.40 FURNACE/HEATER < 100 A018310 1.00 UNIT(S) \$26.80

C DE OF DEVMEND XTOTALOFEES PAIDREFUND MUST\$54.20

PAYMENT TYPE

REFERENCE

AMT TENDERED 178

\$0.00

REQUEST

CHANGE GIVEN AMOUNT APPLIED

\$54.20

OFFICE: BS 0600

DRAWER: MY

CASHIER: MY

CHECK

***** DUPLICATE RECEIPT ****

ITEMS WITH AN ASTERISK (*) WILL REQUIRE FURTHER DEPOSITS WHENEVER ACTUAL COSTS EXCEED THE DEPOSIT AMOUNT

******************************* END OF REPORT *********************

CALCULATION ONLY CODE FACTOR MEASURE

/ ESCRIPTION

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